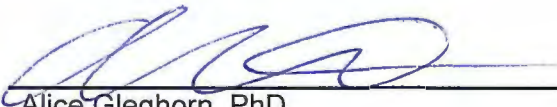





SANTA BARBARA COUNTY  
DEPARTMENT OF  
**Behavioral Wellness**  
A System of Care and Recovery

**Departmental  
Policy and Procedure**

<b>Section</b>	Alcohol and Drug Program (ADP)	<b>Effective:</b>	3/14/2018
<b>Sub-section</b>		<b>Version:</b>	1.0
<b>Policy</b>	Drug Medi-Cal Organized Delivery System (DMC-ODS) Recovery Services	<b>Last Revised:</b>	New policy
<b>Policy #</b>	7.010		
<b>Director's Approval</b>	 _____ Alice Gleghorn, PhD	<b>Date</b>	<u>5/24/18</u>
<b>ADP Division Chief's Approval</b>	 _____ John Doyel, MA, LAADC	<b>Date</b>	<u>5-29-18</u>
<b>Supersedes:</b>	New policy	<b>Audit Date:</b>	3/14/2021

## 1. PURPOSE

- 1.1. To ensure compliance with the requirements of the Drug Medi-Cal Organized Delivery System (DMC-ODS) waiver for the implementation and provision of Recovery Services. Recovery Services are a covered benefit within the DMC-ODS, and counties are responsible for coordinating a system of recovery services for SUD clients.<sup>1</sup>

## 2. DEFINITIONS

The following terms are limited to the purposes of this policy:

- 2.1. American Society of Addiction Medicine (ASAM) Criteria – an outcome-oriented, results-based set of guidelines for treatment criteria, placement, continued stay, and transfer/discharge of individuals with addiction and co-occurring conditions.
- 2.2. Recovery Services – a service to assist beneficiaries in the recovery and wellness process. Recovery Services are designed to emphasize the beneficiary's central role in managing their health, promote the use of effective self-management support strategies, and provide internal and community resources to support ongoing self-management. Recovery services are available to beneficiaries after completing their course of treatment.
- 2.3. Remission – as defined in the Diagnostic and Statistical Manual of Mental Disorders, 5<sup>th</sup> edition ("DSM-V"), a client is in remission if, after full criteria for a substance use disorder were previously met, none of the criteria have been met for at least 3 months.

<sup>1</sup> For more information on the DMC-ODS waiver program in Santa Barbara County, please refer to policy ADP-7.006 "Drug Medi-Cal Organized Delivery System (DMC-ODS) Continuum of Care." A comprehensive implementation plan may also be accessed at this link: <http://countyofsb.org/behavioral-wellness/Asset.c/3866>.

(A client is considered in remission even if Criterion A4 in the DSM-V, a strong craving for the substance, is still met.)

- 2.4. Alcohol and Other Drug (AOD) Counselor – an individual employed or contracted by the county who has obtained credentials from an organization accredited by the National Commission For Certifying Agencies (NCCA) and recognized by the State Department of Health Care Services (DHCS) to provide AOD counseling services in a DHCS-licensed or certified facility.
- 2.5. Licensed Practitioner of the Healing Arts (LPHA) – an individual employed or contracted by the county who is licensed in the state of California as a physician (MD/DO), nurse practitioner (NP), physician’s assistant (PA), registered nurse (RN), registered pharmacist (RPh), licensed clinical psychologist, licensed clinical social worker (LCSW), licensed professional clinical counselor (LPCC), licensed marriage and family therapist (LMFT), or license-eligible practitioner working under the supervision of a licensed clinician.
- 2.6. SUD Peer Support Staff – an individual who completes training and receives county designation as SUD peer support staff as specified in the DHCS- approved County SUD Peer Support Training Plan. Peer support staff must obtain a basic set of competencies necessary to perform and document the peer support function as outlined in the Peer Support Training Plan.<sup>2</sup>

### 3. POLICY

- 3.1. It is the policy of the Alcohol and Drug Program (ADP), a division of the Santa Barbara County Department of Behavioral Wellness (hereafter “the Department”), to comply with and adhere to all requirements as outlined in the Department of Health Care Services (DHCS) approved DMC-ODS waiver and the Centers for Medicare & Medicaid Services (CMS) Special Terms and Conditions (STCs). The Department shall hold responsibility for implementation, oversight and quality management of all programmatic components.
- 3.2. The Department and its contracted providers shall ensure the provision of DMC-ODS recovery services in accordance with the ASAM guidelines, contractual requirements, and applicable federal, state and local laws.
- 3.3. All DMC-ODS contracted providers are expected to individualize treatment and use the full continuum of services available to ensure that beneficiaries receive the appropriate treatment at the appropriate time. Recovery services will be provided to assist beneficiaries after completing their course of treatment.
- 3.4. This policy applies to all County-operated programs and contracted providers responsible for the provision of DMC-ODS services.

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<sup>2</sup> Please refer to the Behavioral Wellness SUD Peer Support Training Plan for SUD Peer Support Staff designation and training requirements.

- 3.5. This policy shall be effective upon the implementation of the DMC-ODS system within Santa Barbara County.

#### 4. **ELIGIBILITY**

- 4.1. To be eligible to receive DMC-ODS recovery services, adult and adolescent beneficiaries must meet all of the following criteria:
1. Be enrolled in Medi-Cal;
  2. Reside in Santa Barbara County;
  3. Have completed their course of SUD treatment;
  4. Meet medical necessity criteria<sup>3</sup> as defined in the DMC-ODS Standard Terms and Conditions, hereafter “STCs” (note that per the DMC-ODS STCs, the initial medical necessity determination and any reauthorizations for medical necessity must be performed by a Medical Director, licensed physician or a LPHA, and signed by a physician); and
  5. Meet the ASAM Criteria definition of medical necessity, in which all of the following must be true:
    - a. The client must have been previously diagnosed with a substance-related and addictive disorder in the DSM-V;
    - b. The client must currently be in a state of “remission,” due to the chronic nature of substance use disorders, with a corresponding and valid ICD-10 diagnosis code for remission;<sup>4</sup>
    - c. The services requested are needed to provide assistance to and address beneficiaries who are triggered, have relapsed, or as a measure to prevent relapse;
    - d. Recovery services are consistent with the prior diagnosis, treatment of the condition, and the standards of good medical practice; and
    - e. Recovery services are required for reasons other than convenience. It is not anticipated that all DMC-ODS clients will need recovery services. Only those clients whose recovery will be jeopardized without recovery services and who are motivated to be engaged in said services shall be provided those services.

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<sup>3</sup> Please refer to the “Behavioral Wellness ADP Documentation Manual” for more information regarding medical necessity.

<sup>4</sup> Please refer to *Mental Health and Substance Use Disorder Services (MHSUDS) Information Notice NO: 17-034, July 27, 2017. International Classification of Diseases, Tenth Revision (ICD-10) Substance Use Disorder (SUD) Remission Codes for the Drug Medi-Cal Organized Delivery System (DMC ODS)* for valid ICD-10 diagnosis codes.

## 5. **PROGRAM OVERVIEW**

- 5.1. Recovery services will be provided to assist beneficiaries in the recovery and wellness process. Recovery Services are designed to emphasize the beneficiary's central role in managing their health, promote the use of effective self-management support strategies, and provide internal and community resources to support ongoing self-management. All recovery services should be provided in the context of an individualized client plan that includes specific goals and identifies Substance Abuse Assistance services including peer-to-peer services and relapse prevention as needed.
- 5.2. Contracted providers offering recovery services must be Drug Medi-Cal (DMC) certified.
- 5.3. A LPHA, AOD counselor, and/or a SUD Peer Support Staff, acting within the scope of their respective practice and competency, may provide recovery services. The individual providing recovery services must be linked to a DMC-certified site/facility and must be proficient in Motivational Interviewing (MI), Cognitive Behavioral Treatment, and trauma-informed care.
- 5.4. Recovery services can be delivered to beneficiaries in a face-to-face setting, by telephone, by telehealth (e.g., video conferencing), or in the community.<sup>5</sup>
  1. When recovery services are provided in the community, the contracted provider delivering the service must be linked to a DMC-certified site. All services must be provided in allowable places of service, which may include (but not be limited to) the following:
    - a. Schools;
    - b. Homeless shelters;
    - c. Offices;
    - d. Places of employment; and
    - e. Clinics.
  2. However, recovery services are excluded at some locations, which may include (but not be limited to) following:
    - a. Private residences;
    - b. Prison/correctional facilities;
    - c. Surgical centers;
    - d. Military treatment facilities;
    - e. Psychiatric residential treatment centers; and
    - f. Comprehensive rehabilitation facilities.

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<sup>5</sup> Please refer to "Drug Medi-Cal Organized Delivery System Place of Service Codes for Professional Claims" for details regarding allowable places of service.

3. Any questions regarding allowable and excluded places of service for recovery services that are provided in the community should be directed to the Department's Alcohol and Drug Program.
- 5.5. All clients are entitled to culturally- and linguistically-competent services in their preferred language. If required or requested by a client, language services will be provided via the Department's translation and interpretation service options.<sup>6</sup>

## 6. **PROGRAM COMPONENTS**

- 6.1. A LPHA or AOD counselor may provide any of the recovery services stated below within the scope of their respective practice and competency. Additionally, SUD Peer Support Staff may provide substance abuse assistance.
  1. **Outpatient counseling services** can be in the form of individual or group counseling, which are intended to stabilize the beneficiary and then reassess if the beneficiary needs further care.
  2. **Recovery monitoring** includes recovery coaching and monitoring via telephone, telehealth, and the internet.
  3. **Substance Abuse Assistance** includes peer-to-peer services and relapse prevention provided by SUD Peer Support Staff. The amount, duration, and scope of peer-to-peer services must be specified in the client's plan. Services must be provided by qualified peer support staff who assist beneficiaries with recovery from their SUDs in accordance with the Peer Support Training Plan.
  4. **Support for education and job skills** includes linkages to life skills, employment services, job training, and education services.
  5. **Family support** includes linkages to childcare, parent education, child development support service, family/marriage education.
  6. **Support groups** include linkages to self-help and faith-based support groups.
  7. **Ancillary services** includes linkages to housing assistance, transportation, case management, and individual services coordination.

## 7. **ROLE OF SUD PEER SUPPORT STAFF**

- 7.1. As part of supported services, SUD peer support staff may provide recovery services only. All peer-led recovery services shall be provided within the context of a comprehensive, individualized client plan.
- 7.2. All SUD peer support staff shall receive specific supervision and training as described in the Department's SUD Peer Support Training Plan. Training provided to SUD peer support staff shall follow a methodology consistent with the requirements outlined in the STCs and guidance by the DHCS.

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<sup>6</sup> Please refer to the "Cultural and Linguistic Competency" policy for further information on language services.

## **8. ASSESSMENT AND TREATMENT PLANNING FOR RECOVERY SERVICES**

- 8.1 A LPHA or AOD counselor shall be responsible for a comprehensive assessment and periodic reassessment with particular attention to Dimension 6, Recovery Environment of the ASAM Criteria, to determine the need for continuation of recovery services. Assessment and periodic reassessment for recovery services is to be conducted at a minimum of once every three (3) months to determine if a beneficiary's needs, condition, and/or preferences have changed.
- 8.2. A LPHA or AOD counselor shall assume responsibility to develop and periodically revise the client treatment plan for recovery service needs. Client treatment plans must have specific, measurable, time-limited goals that may include the plan for ongoing recovery and relapse prevention that was developed during discharge planning when treatment was completed. All plan development will actively involve and encourage the beneficiary's full participation.

## **REFERENCE**

Centers for Medicare and Medicaid Services (CMS)  
*Special Terms and Conditions: California Medi-Cal 2020 Section 1115(1) Demonstration #11-W-00193/9, pgs. 89-121*

California Department of Health Care Services (DHCS)  
*Mental Health and Substance Use Disorder Services (MHSUDS) Information Notice NO: 15-032, August 20, 2015. Drug Medi-Cal Organized Delivery System Waiver Approval*

California Department of Health Care Services (DHCS)  
*Recovery Services: Frequently Asked Questions, Revised August 2017*

California Department of Health Care Services (DHCS)  
*Mental Health and Substance Use Disorder Services (MHSUDS) Information Notice NO: 17-008, February 14, 2017. Peer Support Services in the Drug Medi-Cal Organized Delivery System (DMC-ODS) Waiver*

California Department of Health Care Services (DHCS)  
*Mental Health and Substance Use Disorder Services (MHSUDS) Information Notice NO: 17-034, July 27, 2017. International Classification of Diseases, Tenth Revision (ICD-10) Substance Use Disorder (SUD) Remission Codes for the Drug Medi-Cal Organized Delivery System (DMC ODS)*

Code of Federal Regulations  
Title 42, Part 2

California Code of Regulations – Drug Medi-Cal  
*Title 22, Section 51341.1*

State of California County Contract, County of Santa Barbara #14-90100

County of Santa Barbara Department of Behavioral Wellness Substance Use Disorder (SUD)  
Peer Support Training Plan

California Department of Health Care Services (DHCS)  
*Drug Medi-Cal Organized Delivery System Place of Service Codes for Professional Claims,*  
*August 2017*

## **RELATED POLICIES**

[ADP-7.006 – Drug Medi-Cal Organized Delivery System \(DMC-ODS\) Continuum of Care](#)

## **REVISION RECORD**

<b>DATE</b>	<b>VERSION</b>	<b>REVISION DESCRIPTION</b>

### ***Culturally and Linguistically Competent Policies***

*The Department of Behavioral Wellness is committed to the tenets of cultural competency and understands that culturally and linguistically appropriate services are respectful of and responsive to the health beliefs, practices and needs of diverse individuals. All policies and procedures are intended to reflect the integration of diversity and cultural literacy throughout the Department. To the fullest extent possible, information, services and treatments will be provided (in verbal and/or written form) in the individual's preferred language or mode of communication (i.e. assistive devices for blind/deaf).*